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TRADEM.							(Date)	
APPLICATION NO) FILIT	FILING DATE		INVENTOR	ATTORNEY	DOCKET NO.	CONFIRMATION NO.	
10/079,584 02/2		2/2002 Kenichi M		lizugaki	ci ASAM.0046		7301	
TITLE OF INVENTION: TERMINAL AND SERVER FOR MOBILE TERMINAL POSITIONING SYSTEM								
APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATIO	N FEE	TOTAL FEE(S) DUE	DATE DUE		
nonprovisional NO		\$1330 \$300			\$1630 05/05/2004		<u>_</u>	
EXAMINER		ART UNIT	CLASS - SUBCLASS				·	
ISSING, GREGORY C		3662	342-357020					
form(s) and Customer Number are recommended, but not required. Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.				the names of or agents OF single firm (attorney or a registered pa	For printing on the patent front page, list (1) names of up to 3 registered patent attorneys gents OR, alternatively, (2) the name of a gle firm (have as a member a registered may or agent) and the names of up to 2 istered patent attorneys or agents. If no ne is listed, no name will be printed 1. Reed Smith LLP 2. Stanley P. Fisher, Esq. 3. Juan Carlos A. Marquez, Esq.			
PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. Inclusion of assignee data is only appropriate when an assignment has been previously submitted to the USPTO or is being submitted under separate cover. Completion of this form is NOT a substitute for filing an assignment.								
(A) NAME OF ASSIGNEE (B) RESIDENCE: (CITY and STATE OR COUNTRY)								
HITACHI, LTD.					Tokyo, Japan			
Please check the appropriate assignee category indicated below (will not be printed on the patent) individual \(\mathbb{E}\) Corporation or private group entity government								
Issue fee				4b. Paym	nent of Fee(s):			
☑ Publication Fee			⊠ A che	check in the amount of the fee(s) is enclosed.				
☑ Advance Order - # of Copies: 3				□ Paym	Payment by credit card. Form PTO-2038 is attached.			
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(Authorized Signature)		oate) May 4, 200		on Fee (if any) to	o the application identified abo	ove.		
Stanley P. Fisher Roy No.: 24,344								

TRANSMIT THIS FORM WITH FEE(S) Page 2 of 3

PTOL-85 (Rev.07-01) Approved for use through 01/31/2004. OMB 0651-0033

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